SUPPLEMENTAL NUTRITION PROGRAMS

NOTES

STATEWIDE: In April 2001,

1,242,441 participants were

served by the

WIC Program throughout

California. There were an approximate 950,000

participants under 5 years

old.

Indicator

Participants served by the Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Commodity Supplemental Food Program (CSFP)

Definition

Number of participants served by WIC and CSFP in Orange County. WIC provides food and nutrition education to low-income pregnant, breastfeeding and postpartum women and young children from birth up to 5 years who are at nutritional risk. CSFP provides nutritious food supplements to women during the perinatal period and to children from birth up to 6 years who are from low-income families and vulnerable to poor nutrition.

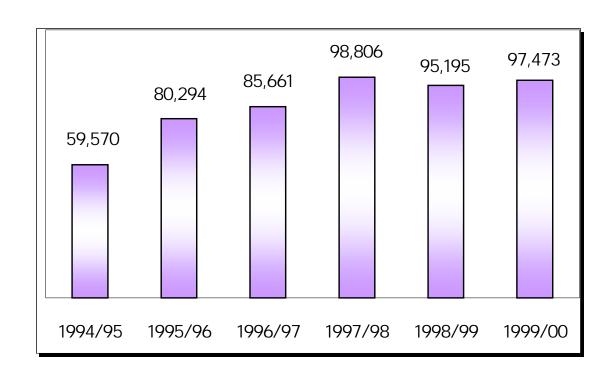
Findings

The total number of participants served by Orange County's WIC programs in 1999/2000 was 97,473. That same year, CSFP served 8,980 women and children participants.

Number of Participants Served by the WIC Program in Orange County

RELATED INDICATORS: • Free and

- Reduced Lunch
- CalWORKs
- Child Support



SUPPLEMENTAL NUTRITION PROGRAMS

Number and Percent of Participants in the Commodity Supplemental Food Program (CSFP)

Participants	1994/95	1995/96	1996/97	1997/98	1998/99	1999/00
Number of	16,544	20,434	18,085	18,195	19,280	20,545
Participants Served	10,544	(16,338*)	(13,260*)	(11,868*)	(11,128*)	(8,980*)
Authorized Caseload	15,000	17,500	15,837	17,743	19,800	22,082
Percent of Authorized	110%	116.5%	114.2%	102.5%	97.4%	93%
Caseload Served	11076	110.5%	114.270	102.576	97.470	9370

^{*}Services to pregnant/postpartum women and children only; excludes low-income senior participation, which the CDC began serving through the CSFP in 1996.

Trends

There was a 63.6% increase in the total number of participants served by WIC since 1994/95. In 1994/95, WIC participants numbered 59,570 compared to the 97,473 served in 1999/00. However, despite this dramatic increase, there was only a 2.4% increase in WIC participants served from the previous year (1998/99). From 1998/99 to 1999/00, there was nearly a 24% decrease in the number of CSFP perinatal women and children participants, 11,128 to 8,980.

Summary

The WIC Supplemental Nutrition Program's purpose is to prevent health problems and to improve the health of its participants during critical times of growth and development. As a result of WIC's historic inability to serve all those eligible for the program, the Orange County Community Development Council (CDC), a private, non-profit organization, requested and received authorization in 1991 to participate in the federal CSFP. The program serves the same low-income population as WIC and, in addition, serves postpartum women for one year and children to their sixth birthday. CSFP has decreased its service to women and children, and increased its service to seniors since WIC has been better able to meet community needs.

Implications

The WIC program is considered one of the most effective federal human service programs. Studies have found that WIC reduces low-birth weight, infant mortality, anemia and nutritional deficits. Even mild forms of under-nutrition can cause impaired cognitive development, fatigue, trouble concentrating in school, and stunted growth. The General Accounting Office estimates that each \$1.00 spent on WIC food and nutrition counseling for pregnant women averts \$3.50 in medical costs, income support, and special education expenditures for low-birth weight infants.

NOTES



SEE
SUPPLEMENTAL
TABLES FOR
ADDITIONAL
DATA

NATIONWIDE: In fiscal year 1999, the National WIC Program served an average 7.3 million participants per month. About half of all infants and almost one-quarter of all children 1 to 4 years of age in the U.S. participated in WIC.²

DATA
SOURCES:
Orange County
Health Care
Agency/Nutrition
Services - WIC
Program, Orange
County Community
Development
Council, CSFP

NOTES:

¹California
Department of
Health Services WIC Branch

²USDA Food and
Nutrition
Assistance
Programs

SUPPLEMENTAL TABLES: ECONOMIC WELL-BEING

Indicator

Supplemental Nutrition Program for Women, Infants and Children (WIC), breastfeeding rates and nutrition assessment

Definition

Participants served by the WIC Program and nutritional assessment data from the Child Health & Disability Prevention (CHDP) Program.

Number or Participants Served by the WIC Program in Orange County

Participants	1994/95	1995/96	1996/97	1997/98	1998/99	1999/00
Number of Participants in WIC*	59,570	80,294	85,661	98,806	95,195	98,482
Caseload Allocation**	64,900	90,975	90,975	95,500	97,000	103,500
Percent of Caseload served in Orange Co.	91.8	88.3	94.2	103.5	98.1	95.2

^{*}Participation is based on the number of women, infants and children served during the month of September by the four WIC agencies serving Orange County.

Sources: County of Orange Health Care Agency/Nutrition Services-WIC Program.

Mission Hospital's Camino Health Center-WIC Program.

Planned Parenthood of Orange and San Bernardino Counties-WIC Program.

Public Health Foundation Enterprises-WIC Program.

In Hospital Breastfeeding Choices as Indicated on the Newborn Screening Form in Orange County

	1994	1995	1996	1997	1998	1998 State Rank 1=Highest rate
Number of Known Feeding Choices at Discharge	48,404	48,004	46,912	46,391	44,737	NA
Breastfeeding Only Rate	32%	33%	32%	33%	32%	51 out of 58 counties
Breastfeeding/formula Rate	45%	44%	46%	46%	48%	NA
Formula Fed Only Rate	23%	23%	22%	21%	20%	NA

Data prepared by the Epidemiology and Evaluation Section, Maternal and Child Health Branch California Department of Health Services.

Source Data: Newborn Screening Test Form (DHS) 4409

^{**}Caseload is based on the combined caseload allocations for the four WIC agencies serving Orange County.

CHDP Program - Pediatric Nutrition Surveillance System (PedNSS) Statistics, 1999*

Percent of Records with Abnormal Nutrition Values

Abnormal Nutrition Values	Orange County	California	United States
Underweight (<5 th percentile weight for height)	2.2	2.2	2.4
Short stature (<5 th percentile height for age)	6.0	6.3	7.7
Overweight (>95 th percentile weight for height)	14.9	14.4	11.0
Low hemoglobin** (<cdc cut="" levels***)<="" off="" td=""><td>16.8</td><td>13.3</td><td>16.5</td></cdc>	16.8	13.3	16.5
Low hematocrit (< CDC cut off levels***)	12.4	11.2	15.4
Low hematology (hgb or hct < CDC cut off levels***)	15.7	14.2	16.4
Total records accepted in PedNSS	146,123	1,711,913	6,884,331

<u>Anemia</u>: Percent of Records with Hemoglobin** Levels Below CDC Cut Off*** Criteria

Area	1994	1995	1996	1997	1998	1999*
Orange County	16.6	17.2	17.7	17.9	18.6	16.8
California	16.6	16.5	15.6	15.0	14.0	13.3
United States	19.8	19.8	18.5	17.7	17.0	16.5

Obesity: Percent of Records with Weight Greater than 95th Percentile on the Pediatric Growth Chart

Area	1994	1995	1996	1997	1998	1999*
Orange County	13.8	13.8	13.3	13.7	14.6	14.9
California	13.0	13.3	13.1	13.4	14.1	14.4
United States	10.0	9.9	10.1	10.3	10.7	11.0

^{*}Preliminary data.

Sources: County of Orange Health Care Agency.

Child Health & Disability Prevention (CHDP) Program.

Centers for Disease Control and Prevention, Pediatric Nutrition Surveillance System (PedNSS).

^{**}Hemoglobin is the main component of red blood cells. It carries oxygen and carbon dioxide throughout the body and accounts for 60-70% of a person's total body iron.

^{***}The Centers for Disease Control and Prevention established criteria for determining anemia; these levels vary based on age and gender.

SUPPLEMENTAL TABLES: ECONOMIC WELL-BEING

Indicator

Non-Assistance Food Stamps

Non-Assistance Food Stamp Recipients in Orange County

December of:	1995	1996	1997	1998	1999	2000
Persons Number	53,010	44,094	29,075	27,999	39,953*	28,939
% Change	NA	-17%	-34%	-4%	43%	-27.6%
Children less than 18 years of age	15,409	13,942	11,763	11,527	16,665*	13,668
% Change	3%	-10%	-16%	-2%	-9.60%	-17.98%
% of children	29.07%	31.62%	40.46%	41.17%	41.71%	47.23%

^{*}Two-parent Families State program effective 10/99; reflects coding change for mixed assistance food stamp households.

Source: County of Orange Social Services Agency.